Please direct all communications to the following address:

1050 Connecticut Avenue, N.W., Suite 600 Washington, D.C. 20036-5339 Telephone No. (202) 857-6000; Facsimile No. (202) 638-4810

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made

re nunishable b	by fine or imprisonment, or both, under Se jeopardize the validity of the application	ection 1001 of Title 18 of the United States C	ode and that such willful false
See Note C on back of his page)	Full name of sole or first inventor	Toru OHASHI	
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Full name of third joint inventor, if any		
Inventor's signature	_ Date	
Residence		
Citizenship		· · · · · · · · · · · · · · · · · · ·
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Inventor's signature	_ Date	
Residence		2/21/17
Citizenship		
Post Office Address		100 100 110
Full name of fifth joint inventor, if any		
Inventor's signature	_ Date	
Residence		
Citizenship		
Post Office Address		
Full name of sixth joint inventor, if any		
Inventor's signature	_ Date	
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Citizenship		
Post Office Address		
Full name of seventh joint inventor, if any		
Inventor's signature	_ Date	
Residence		
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